

PART B - FEE(S) TRANSMITTAL

	rm should be used for tran- respondence including the below or directed otherwise 135. TE ADDRESS (Note: Use Block I for		JE FEE and Proders and notification of the production of the produ	UBLICATION FEE (if requestion of maintenance fees new correspondence address	uired). Blocks 1 through 5 si will be mailed to the current s; and/or (b) indicating a sepa	bould be completed when correspondence address a
CURRENT CORRESPONDENCE	13.					mic LEE VDDKE22. 10
27383 75		any change of address)		Note: A certificate of Fee(s) Transmittal. The	f mailing can only be used for his certificate cannot be used i	or domestic mailings of the
	27383 7590 01/10/2006			papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
CLIFFORD CHANCE US LLP 31 WEST 52ND STREET NEW YORK, NY 10019-6131 0/2006 TBESHAH2 00000067 500521 09710137				Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below.		
				Katheri	ne Beasley	(Depositor's name)
C:1501 1400.00 DA				Layhens	· Bearles-	(Signature)
C:8001 30.00				4/7/6		(Date
APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/710,137	11/10/2000	<u> </u>	Eric L.L.		63422	4610
APPLN. TYPE	SMALL ENTITY	ISSUE FI		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	0	\$0	\$1400	04/10/2006
EXAMINER		ART UNIT		CLASS-SUBCLA SS		·
RUDY, ANDREW J		3627		705-023000	_	
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in					nce is identified below, the d	ocument has been filed fo
(A) NAME OF ASSIGN	EE	(B	B) RESIDENCE	E: (CITY and STATE OR CO	UNTRY)	
	ansaction Solut					
Please check the appropriate					Corporation or other private gro	oup entity U Governmen
4a. The following fee(s) are enclosed: 4b. Payment of A check i				ec(s): the amount of the fee(s) is en	nclosed.	
				by credit card. Form PTO-2038 is attached.		
Advance Order - # of Copies . 0			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-6521 (enclose an extra copy of this form).			
5. Change in Entity Status a. Applicant claims Si	(from status indicated above MALL ENTITY status. See				LL ENTITY status. See 37 Ci	
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ne Fee and Publicate will not be accepted and Trademark	tion Fee (if any d from anyone Office.) or to re-apply any previous other than the applicant; a reg	ly paid issue fee to the applica istered attorney or agent; or th	tion identified above. e assignee or other party it
Authorized Signature				Date	417/2006	
Typed or printed name	Isabel Cantall	ops		Registration	No. <u>57,710</u>	
- ' b or b mor man _		11 The information	n is required to	obtain or retain a benefit by	the public which is to file (and	by the USPTO to process
This collection of informatial an application. Confidential submitting the completed apthis form and/or suggestions Box 1450, Alexandria, Virginia 22313-	ity is governed by 35 U.S.C. pplication form to the USPT for reducing this burden, st inia 22313-1450. DO NOT 1450.	O. Time will vary tould be sent to the SEND FEES OR C	depending upon Chief Information	ection is estimated to take 12 in the individual case. Any cution Officer, U.S. Patent and FORMS TO THIS ADDRES.	minutes to complete, includin omments on the amount of tin Trademark Office, U.S. Deps S. SEND TO: Commissioner f displays a valid OMB control	g gamering, preparing, and ne you require to complet utment of Commerce, P.O. for Patents, P.O. Box 1450